RI SOS Filing Number: 202455654630 Date: 6/10/2024 3:50:00 PM



State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2024 **Limited Liability Company**

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number	2. Exact name of the Limi	2. Exact name of the Limited Liability Company					
001710133	Bella Properties	Bella Properties RI, LLC					
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island					
531311	Investment Propert	Investment Properties & Property Management					
5. State of Formation							
6. Principal Office Address		City	State	Zip			
65 Gillen St		Providence	RI	02904			
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person					
Contact Name Nancy Rodriguez		Contact Title Sole Member					
Street Address 65 Gillen St		City Providence	State RI	^{Zip} 02904			
8. The Resident Agent infor	mation currently of record with the	ne RI Department of State is accur	ate. Changes requir	e filing Form 642.			
Under penalty of perjur statements, and that all s	y, I declare and affirm that I ha tatements contained herein an	eve examined this report, include true and correct.	ing any accompany	ing schedules and			
Name of Authorized Person			Date				
Nancy Rodriguez			04/16/20	04/16/2024			
Signature of Authorized Per	sdn			-			
	X	· · · · · · · · · · · · · · · · · · ·					

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MAIL TO:

Division of Business Services 148 W. River Street, Providence. Rhode Island 02904-2615

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